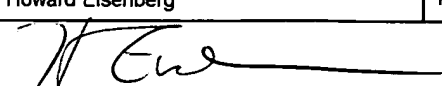


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new non-provisional applications under 37CFR§1.53(b))		Attorney Docket No.	747.0037
		First Inventor or Application Identifier	Bob M. Moore II
		Title	METHOD AND KIT FOR REGULATION OF MICROVASCULAR TONE
		Express Mail Label No.	ER 491540794 US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 C.F.R. 1.27 3. <input checked="" type="checkbox"/> Specification [Total pages 27] (preferred arrangement set forth below) - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Federally Sponsored R&D - Reference to sequence listing, a table or a computer program listing - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages 3] 5. Oath or Declaration [Total 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with Box 17 completed) i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.53(d)(2) and 1.33(b) 6. <input type="checkbox"/> Application Data Sheet. See 37 C.F.R. 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on i. <input type="checkbox"/> CD-ROM or CD-R (2 copies) or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies	
		ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English translation document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO SB08 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 C.F.R. 1.76. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <u>10 / 436,028</u> Prior application information: Examiner <u>Spivack, Phyllis G.</u> Group No./Art Unit <u>1614</u> For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
17. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 29085 (Insert customer number or attach bar code label here) or <input type="checkbox"/> Correspondence address below			
Name	Howard Eisenberg, Esq.		
Address	2206 Applewood Court		
City	Perkasie	State	PA
Country	USA	Telephone	(215) 453-9237
		FAX	(215) 701-0803
Name (print/ type)	Howard Eisenberg	Registration No. (Attorney/Agent)	36,789
Signature		Date	April 12, 2004

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete If Known

Application Number	
Filing Date	April 12, 2004
First Named Inventor	Bob M. Moore II
Examiner Name	
Art Unit	
Attorney Docket No.	747.0037

☒ Applicant claims small entity status. See 37CFR 1.27

TOTAL AMOUNT OF PAYMENT \$448

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account

Deposit Account Number **50-1773**
Deposit Account Name **Howard Eisenberg**

The Commissioner is authorized to: (check all that apply)

☒ Charge fees indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Code (\$)	Code (\$)		
1001 770	2001 385	Utility filing fee	385
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			\$385

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
27 - 20	**= 7	x 9	= 63
Indep. Claims 3 - 3	**= 0	x 43	= 0
Multiple Dependent			

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	**Reissue independent claims over original patent	
1205 18	2205 9	*Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			\$63

**or number of previously paid, if greater. For reissues, see above.

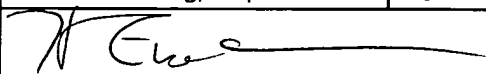
FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge-late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex-parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt.	
8021 40	8021 40	Recording each patent assignment per property (times no. of properties) - total assignments	
1809 770	2809 385	Filing a submission after final rejection (37 C.F.R. 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify)			
* Reduced by Basic Filing Fee Paid			
SUBTOTAL (3)			\$0

SUBMITTED BY

Complete (if applicable)

Name (print type)	Howard Eisenberg, Esq.	Registration No.	36,789	Telephone	(215) 453-9237
Signature		Date	April 12, 2004		

CERTIFICATE OF MAILING

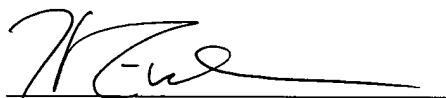
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ER491540794US

Express Mail No.: ER 491540794 US

Date of Deposit : April 12, 2004

I hereby certify that the utility patent application attached hereto entitled
METHOD AND KIT FOR REGULATION OF MICROVASCULAR TONE (27 pages plus 3
drawing sheets), Bob M. Moore II, inventor, together with Fee Transmittal form (duplicate),
Utility Patent Application Transmittal form, Declaration and Power of Attorney (executed), and
the required fees (check), is being deposited with the United States Postal Service "Express Mail
to Addressee" on the date indicated above and is addressed to: Mail Stop Patent Application,
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Howard Eisenberg